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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)Attorney Docket
Number

20111-27

First Named Inventor

GALLO, Richard

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BALLOON DEPLOYABLE STENT AND METHOD OF USING THE SAME

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

05/27/2003

as United States Application Number or PCT International

Application Number

PCT/CA2003/001676

and was amended on (MM/DD/YYYY)

herewith

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
60/422,489	US	10/31/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> The address associated with Customer Number: 		OR <input checked="" type="checkbox"/> Correspondence address below	
Name Louis Tessier			
Address P.O. Box 54029			
City Town of Mount-Royal		State Quebec	ZIP H3P 3H4
Country Canada	Telephone (514) 990-3434	Fax (514)736-2158	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Richard		Family Name or Surname GALLO	
Inventor's Signature			Date
Residence: City Montreal	State Quebec	Country Canada	Citizenship Canadian
Mailing Address 31, de l'Orée du Bois			
City Montreal	State Quebec	Zip H3E 2A1	Country Canada
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Patrick		Family Name or Surname TERRIAULT	
Inventor's Signature			Date
Residence: City Verdun	State Quebec	Country Canada	Citizenship Canadian
Mailing Address 1754 Parkdale			
City Verdun	State Quebec	Zip H4H 3R9	Country Canada
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Vladimir		BRAILOVSKI	
Inventor's Signature			Date
Montreal Residence: City	Quebec State	Canada Country	Canadian Citizenship
3110, Kirkfield Mailing Address			
Montreal City	Quebec State	H3R 2E6 Zip	Canada Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	GALLO, Richard
Title	BALLOON DEPLOYABLE STENT AND ...
Art Unit	
Examiner Name	
Attorney Docket Number	20111-27

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Louis Tessier	45,289

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Louis Tessier				
Address	P.O. Box 54029				
City	Town of Mount-Royal	State	Quebec	Zip	H3P 3H4
Country	Canada				
Telephone	(514) 990-3434	Fax	(514)736-2158		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Signature		Date	
Name	GALLO, Richard	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	GALLO, Richard
Title	BALLOON DEPLOYABLE STENT AND ...
Art Unit	
Examiner Name	
Attorney Docket Number	20111-27

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Number:

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OR

☒ Practitioner(s) named below:

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Louis Tessier	45,289

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	
Name	TERRIAULT, Patrick	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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INDICATION FORM****Application Number****Filing Date****First Named Inventor**

GALLO, Richard

Title

BALLOON DEPLOYABLE STENT AND ...

Art Unit**Examiner Name****Attorney Docket Number**

20111-27

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Number:

OR

☒

Practitioner(s) named below:

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Louis Tessier	45,289

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The address associated with the above-mentioned Customer Number:

OR

☐

The address associated with Customer Number:

OR

☒Firm or
Individual Name

Louis Tessier

Address

P.O. Box 54029

City

Town of Mount-Royal

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Zip

H3P 3H4

Country

Canada

Telephone

(514) 990-3434

Fax

(514)736-2158

I am the:

☒

Applicant/Inventor.

☐

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	
Name	BRAILOVSKI, Vladimir	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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